

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

DARYL BETTS

Debtor(s)

Case No. 15-01378

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/15/2015.
- 2) The plan was confirmed on 04/13/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was dismissed on 11/16/2015.
- 6) Number of months from filing to last payment: 6.
- 7) Number of months case was pending: 11.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor \$3,080.00  
Less amount refunded to debtor \$0.00

**NET RECEIPTS: \$3,080.00**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$2,895.92  
Court Costs \$0.00  
Trustee Expenses & Compensation \$136.08  
Other \$48.00

**TOTAL EXPENSES OF ADMINISTRATION: \$3,080.00**

Attorney fees paid and disclosed by debtor: \$0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVENTIS BOLINGBROOK HOSPITAL	Unsecured	1,731.00	NA	NA	0.00	0.00
ADVENTIS BOLINGBROOK HOSPITAL	Unsecured	689.00	NA	NA	0.00	0.00
ADVENTIS BOLINGBROOK HOSPITAL	Unsecured	219.00	NA	NA	0.00	0.00
ADVENTIS BOLINGBROOK HOSPITAL	Unsecured	216.00	NA	NA	0.00	0.00
ADVENTIS BOLINGBROOK HOSPITAL	Unsecured	100.00	NA	NA	0.00	0.00
APRIL RUSSELL	Priority	17,516.75	NA	NA	0.00	0.00
AT&T Mobility	Unsecured	303.00	925.51	925.51	0.00	0.00
CITY OF CHICAGO DEPT OF REVENUE	Unsecured	1,000.00	7,081.00	7,081.00	0.00	0.00
DUPAGE COUNTY CLERK OFFICE	Unsecured	200.00	NA	NA	0.00	0.00
Global Pymt	Unsecured	216.00	NA	NA	0.00	0.00
Global Pymt	Unsecured	216.00	216.38	216.38	0.00	0.00
IL STATE DISBURSEMENT UNIT	Unsecured	9,000.00	NA	NA	0.00	0.00
IL STATE DISBURSEMENT UNIT	Unsecured	NA	9,571.60	9,571.60	0.00	0.00
IL STATE DISBURSEMENT UNIT	Unsecured	NA	26,656.16	26,656.16	0.00	0.00
ILLINOIS DEPT OF REVENUE	Unsecured	NA	194.10	194.10	0.00	0.00
ILLINOIS DEPT OF REVENUE	Priority	NA	726.39	726.39	0.00	0.00
ILLINOIS SECRETARY OF STATE	Unsecured	219.00	NA	NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	NA	0.00	0.00	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	10,636.20	7,707.10	7,707.10	0.00	0.00
LORI MITCHELL	Priority	11,021.86	NA	NA	0.00	0.00
MT SINAI HOSPITAL MEDICAL CTR	Unsecured	1,690.00	NA	NA	0.00	0.00
PEOPLES GAS LIGHT & COKE CO	Unsecured	3,432.00	NA	NA	0.00	0.00
QUEST DIAGNOSTICS	Unsecured	71.00	NA	NA	0.00	0.00
VERIZON	Unsecured	1,196.00	1,174.08	1,174.08	0.00	0.00
WEST SUBURBAN	Unsecured	1,017.00	NA	NA	0.00	0.00
WEST SUBURBAN	Unsecured	781.00	NA	NA	0.00	0.00
WEST SUBURBAN	Unsecured	531.00	NA	NA	0.00	0.00
WEST SUBURBAN	Unsecured	435.00	NA	NA	0.00	0.00
WEST SUBURBAN	Unsecured	52.00	NA	NA	0.00	0.00
WEST SUBURBAN MEDICAL CENTER	Unsecured	513.00	NA	NA	0.00	0.00
WEST SUBURBAN MEDICAL CENTER	Unsecured	4,849.00	NA	NA	0.00	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
WEST SUBURBAN MEDICAL CENTEF	Unsecured	1,461.00	NA	NA	0.00	0.00
WEST SUBURBAN MEDICAL CENTEF	Unsecured	282.00	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$726.39	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$726.39</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$53,525.93</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$3,080.00</u>	
Disbursements to Creditors	<u>\$0.00</u>	
<b>TOTAL DISBURSEMENTS :</b>		<b><u>\$3,080.00</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 12/23/2015

By: /s/ Tom Vaughn

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.